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FACSIMILE TRANSMISSION COVER SHEET

Date:

July 29, 2005

To:

United States Patent and Trademark Office

Examiner: Jackson, Jakieda R.; Art Unit: 2655

Fax:

(571) 273-8300

Re:

Application Serial No.: 09/761,033

Filing Date: 1/16/2001; First-Named Inventor: Gao

Attorney Docket No.: 01CON346P

From:

Farjami & Farjami LLP

Number of pages including the cover sheet: 13

Message:

Enclosed please find the Amendment and Response to Non-Final Office Action dated April 29, 2005.

Thank you.

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Attorney Docket No.: 01CON346P

795.00

\$

AMENDMENT COVER SHEET

IN RE APPLICATION OF: Gao, et al.			
SERIAL NO.: <u>09/761,033</u> FILED: <u>January 16, 2001</u>			
FOR: System for an Adaptive Excitation Pattern for Speech Co	oding		
HONORABLE COMMISSIONER FOR PATENTS P.O. Box 1450, Alexandria, VA 22313-1450			
Sir/Madam:			
Transmitted herewith is a paper in the above-identified applicat is hereby requested.	tion. Any necessary ext	ension of time period s	set for this paper
図 No additional fee is required.			
☐ The fee has been calculated as shown below:			
□ EXTENSION FEE	RATE Non-Small Entity	RATE Small-Entity	FEE
FIRST MONTH AFTER TIME PERIOD SET	120.00	60.00	\$
SECOND MONTH AFTER TIME PERIOD SET	450.00	225.00	\$
THIRD MONTH AFTER TIME PERIOD SET 1,020,00 \$10,00 \$			

☐ TOTAL EXTENSION FEE \$ 0.00

FOURTH MONTH AFTER TIME PERIOD SET.

☐ FEE FOR EXTRA CLAIMS added by Amendment in this response:

	Column 1	Column 2	Column 3			
	Number of Claims after Amendment	Number Previously Paid for	Number of Extra Claims	RATE Non-Small Entity	RATE Small Entity	FEE
TOTAL CLAIMS	14	MINUS **27	*=0	x 50	x 25	\$
INDEPENDENT	2	MINUS ***3	* = 0	x 200	x 100	\$
First presentation of	multiple depend	ent claim		+ 360	+ 180	\$

1,590.00

TOTAL FEE FOR EXTRA CLAIMS \$ 0.00

- * If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.
- ** If the number of Total Claims previously paid for is less than 20, write "20" in this space.
- *** If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

Attorney Docket No.: 01CON346P

	Total fee for Supplemental Information Disclosure Statement \$
	Enclosed is the total fee of \$ (Payment by Credit Card, Form PTO-2038 Enclosed).
	Please charge Deposit Account No. 50-0731 in the amount of \$
×	The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication or credit any overpayment to Deposit Account No. 50-0731. A duplicate copy of this sheet is enclosed.
Date:	7/24/05 By Farshad Farjami, Reg. No. 41,014

<u>CERTIFICATE OF FACSIMILE TRANSMISSION</u>
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Farshad Farjami, Esq. Farjami & Farjami LLP 26522 La Alameda Ave., Suite 360 Mission Viejo, CA 92691 Telephone: (949) 282-1000 Facsimile: (949) 282-1002

Name of Person Performing Facsimile Transmission

Attorney Docket No.: 01CON346P

AMENDMENT COVER SHEET

IN RE APPLICATION OF: Gao, et al.	•				
SERIAL NO.: 09/761,033 FILED: January 16, 2001					
FOR: System for an Adaptive Excitation Pattern for Speech C	Coding		·		
HONORABLE COMMISSIONER FOR PATENTS P.O. Box 1450, Alexandria, VA 22313-1450					
Sir/Madam:					
Transmitted herewith is a paper in the above-identified applic is hereby requested.	ation. Any necessary exte	nsion of time period	set for this paper		
☑ No additional fee is required.	☑ No additional fee is required.				
☐ The fee has been calculated as shown below:					
□ EXTENSION FEE	RATE Non-Small Entity	RATE Small-Entity	FEE		
FIRST MONTH AFTER TIME PERIOD SET	120.00	60.00	\$		
SECOND MONTH AFTER TIME PERIOD SET	450.00	225.00	\$		
THIRD MONTH AFTER TIME PERIOD SET	1,020.00	510.00	\$		
FOURTH MONTH AFTER TIME PERIOD SET	1,590.00	795.00	\$		
TOTAL DISTRICT	<u> </u>	***************************************			

☐ TOTAL EXTENSION FEE \$ 0.00

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- ** If the number of Total Claims previously paid for is less than 20, write "20" in this space.
- *** If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

	Another Docket No.: 01CON346F
	Total fee for Supplemental Information Disclosure Statement \$
	Enclosed is the total fee of \$ (Payment by Credit Card, Form PTO-2038 Enclosed).
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X	The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication, or credit any overpayment to Deposit Account No. 50-0731. A duplicate copy of this sheet is enclosed.
Date:	7/29/05 By Farshad Farjami, Reg No. 41,014

Farshad Farjami, Esq. Farjami & Farjami LLP 26522 La Alameda Ave., Suite 360 Mission Viejo, CA 92691

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Name of Person Performing Facsimile Transmission

Attorney Docket No.: 01CON346P Serial No.: 09/761,033

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Yang Gao

Group Art Unit: 2655

Application Serial No.: 09/761,033

Examiner: Jackson, Jakieda R.

Filed: January 16, 2001

Title: System for an Adaptive Excitation

Pattern for Speech Coding

AMENDMENT AND RESPONSE TO NON-FINAL OFFICE ACTION

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Examiner:

This Amendment and Response is submitted in response to the *Non-Final* Office Action, dated April 29, 2005, in the above-referenced patent application. Please consider the following remarks.